

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AC PAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

4040 W 70TH ST

☐ Check if different than previously reported. (ACC)

MINNEAPOLIS

MN

55435

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00034785

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☒ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Adam Peterman

Signature of Treasurer

Adam Peterman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
08 / 01 / 2008 To: M M / D D / Y Y Y Y Y Y  
08 / 31 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2008</span>		<span style="border: 1px solid black; padding: 2px;">265723.19</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">299732.39</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">15309.07</span>	<span style="border: 1px solid black; padding: 2px;">146231.92</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">315041.46</span>	<span style="border: 1px solid black; padding: 2px;">411955.11</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">74375.33</span>	<span style="border: 1px solid black; padding: 2px;">171288.98</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">240666.13</span>	<span style="border: 1px solid black; padding: 2px;">240666.13</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Report Covering the Period:

From:

08

01

2008

To:

08

31

2008

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

13500.00

130456.00

(ii) Unitemized .....

1500.00

10337.50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

15000.00

140793.50

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

15000.00

140793.50

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

2500.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

309.07

2938.42

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

15309.07

146231.92

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

15309.07

146231.92

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3125.33	4530.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3125.33	4530.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	71250.00	165750.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	1008.72
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	74375.33	171288.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74375.33	171288.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15000.00	140793.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	140793.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	3125.33	4530.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	3125.33	4530.26

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. James Angelo**

Mailing Address P. O. Box 182190

City

Shelby Township

State

MI

Zip Code

48318-2190

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J.J. Marshall & Assoc.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6585**

Amount of Each Receipt this Period

450.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Stuart Blatt**

Mailing Address 110 West Rd  
Ste 222

City

Towson

State

MD

Zip Code

21204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Margolis Pritzker Epstein Blat

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6594**

Amount of Each Receipt this Period

600.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Robert Borski**

Mailing Address P. O. Box 182221

City

Chattanooga

State

TN

Zip Code

37422-7221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

North American Credit Svcs.

Occupation

CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6591**

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Ron Brown**

Mailing Address 2519 NW 23rd St., Ste. 204

City State Zip Code  
 Oklahoma City OK 73107-2252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Collection Services Intl.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 15 / 2008

Transaction ID : SA11AI.6610

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Jack Brown III**

Mailing Address 5630 Marquesas Circle

City State Zip Code  
 Sarasota FL 34233-3331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulf Coast Collection Bureau

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 04 / 2008

Transaction ID : SA11AI.6596

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Mark Davitt**

Mailing Address 200 Cross Keys Office Park

City State Zip Code  
 Fairport NY 14450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Conserve

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 06 / 2008

Transaction ID : SA11AI.6599

Amount of Each Receipt this Period

4700.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Albert DiGiacomo**

Mailing Address 1900 Brewerton Rd

City  
Syracuse

State  
NY

Zip Code  
13211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6590**

Amount of Each Receipt this Period

225.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Jon Dunn**

Mailing Address 1331 Citizens Pkwy  
Ste 110

City

Morrow

State

GA

Zip Code

30260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Diversified Acct Systems of GA

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6593**

Amount of Each Receipt this Period

75.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Ronald France**

Mailing Address P. O. Box 11879

City

Fort Lauderdale

State

FL

Zip Code

33339-1879

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Broward Adjustment Service

Occupation

Secretary/Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 06 / 2008

**Transaction ID : SA11AI.6607**

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Ronald Greene**

Mailing Address 404 Brock Dr

City

Bloomington

State

IL

Zip Code

61701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFNI Inc

Occupation

President/COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2650.00

Date of Receipt

08 / 21 / 2008

**Transaction ID : SA11AI.6612**

Amount of Each Receipt this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Stephen Gunter**

Mailing Address 3300 Sunset Blvd  
Ste 101

City

West Columbia

State

SC

Zip Code

29169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Accts Receivable Collections

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6589**

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Daniel Heisel**

Mailing Address 3687 Warsaw Ave

City

Cincinnati

State

OH

Zip Code

45205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Controlled Credit Corp.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.6587**

Amount of Each Receipt this Period

150.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. James Hess**

Mailing Address 1310 Martin Luther King Dr.

City State Zip Code  
 Bloomington IL 61701-1465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Afni, Inc.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 21 / 2008

**Transaction ID : SA11AI.6613**

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Ron Jacobs**

Mailing Address 11300 Rockville Pike, Ste. 1200

City State Zip Code  
 Rockville MD 20852

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 04 / 2008

**Transaction ID : SA11AI.7058**

Amount of Each Receipt this Period

125.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Zahir Kazmi**

Mailing Address 210 W. 22nd St., Ste. 115

City State Zip Code  
 Oakbrook IL 60523-4047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Outsource R Us

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

08 / 06 / 2008

**Transaction ID : SA11AI.6602**

Amount of Each Receipt this Period

150.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

575.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 23

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Loraine Lyons**Mailing Address 11811 North Fwy  
Ste 900

City	State	Zip Code
Houston	TX	77060

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FMA Alliance Inc

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2008

**Transaction ID : SA11AI.6598**

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Mabry Nancy**

Mailing Address P. O. Box 1577

City	State	Zip Code
Pendleton	OR	97801-0980

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Credits Inc.

Occupation

Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2008

**Transaction ID : SA11AI.7056**

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**C. John O'Donnell**

Mailing Address 404 Brock Dr

City	State	Zip Code
Bloomington	IL	61701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFNI Inc

Occupation

VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2008

**Transaction ID : SA11AI.6615**

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

850.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 23

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. William Pearson**

Mailing Address P. O. Box 589

City

Franklin

State

TN

Zip Code

37065-0589

FEC ID number of contributing  
federal political committee.

C

Name of Employer

C&amp;C Service Corp.

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	8

**Transaction ID : SA11AI.6603**

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Albert Rookard**

Mailing Address P. O. Box 1882

City

Wenatchee

State

WA

Zip Code

98807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Client Access Web

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	8

**Transaction ID : SA11AI.6609**

Amount of Each Receipt this Period

525.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Tawn Rose**

Mailing Address 1705 W. Northwest Hwy., Ste. 175

City

Grapevine

State

TX

Zip Code

76051-8124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Collection Advisor Magazine

Occupation

Editor/Publisher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	8

**Transaction ID : SA11AI.6600**

Amount of Each Receipt this Period

300.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Nat Rubinfeld**

Mailing Address P. O. Box 4270

City

Burbank

State

CA

Zip Code

91503-4270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Union Adjustment

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 06 / 2008

Transaction ID : SA11AI.6605

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Vic York**

Mailing Address 1880 S. Dairy Ashford St.  
Ste. 180

City

Houston

State

TX

Zip Code

77077-4746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CEX Financial Services

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 04 / 2008

Transaction ID : SA11AI.6595

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

13500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 23  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. US Bank**

Mailing Address 344 Jackson

City State Zip Code  
 St. Paul MN 55104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2938.42

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 31 2008

**Transaction ID : SA17.6617**

Amount of Each Receipt this Period

309.07

Bank interest

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

309.07

309.07

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 23

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. IRS**

Mailing Address Department of the Treasury

City Kansas City      State MO      Zip Code 64999

Purpose of Disbursement  
Federal taxes

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      31      2008
**Transaction ID : SB21B.6672**

Amount of Each Disbursement this Period

2129.00

Full Name (Last, First, Middle Initial)

**B. MN Department of Revenue**

Mailing Address 600 North Robert St.

City St. Paul      State MN      Zip Code 55104

Purpose of Disbursement  
State taxes

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      31      2008
**Transaction ID : SB21B.6669**

Amount of Each Disbursement this Period

596.00

Full Name (Last, First, Middle Initial)

**C. US Bank**

Mailing Address 344 Jackson

City St. Paul      State MN      Zip Code 55104

Purpose of Disbursement  
Bank fees

001

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08      31      2008
**Transaction ID : SB21B.6671**

Amount of Each Disbursement this Period

400.33

**SUBTOTAL** of Disbursements This Page (optional)..... ►

3125.33

**TOTAL** This Period (last page this line number only)..... ►

3125.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BACHMANN FOR CONGRESS**

Mailing Address PO Box 25950

City	State	Zip Code
Woodbury	MN	55125

Purpose of Disbursement  
Contribution

011

Candidate Name

**Michele Bachmann**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2008

**Transaction ID : SB23.6619**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. DAVE CAMP FOR CONGRESS**Mailing Address 5915 EASTMAN AVENUE  
SUITE 100

City	State	Zip Code
MIDLAND	MI	48640

Purpose of Disbursement  
Contribution

011

Candidate Name

**DAVID LEE CAMP**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2008

**Transaction ID : SB23.6628**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. EVERY REPUBLICAN IS CRUCIAL (ERICPAC)**Mailing Address 25 E MAIN STREET  
SUITE 200

City	State	Zip Code
RICHMOND	VA	23219

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.6636**

Amount of Each Disbursement this Period

5000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF ERIK PAULSEN**

Mailing Address P.O. BOX 44369

250 PRAIRIE CENTER DRIVE

City

EDEN PRAIRIE

State

MN

Zip Code

55344

Purpose of Disbursement  
Contribution

011

Candidate Name

**ERIK PAULSEN**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2008



Primary



General



Other (specify) ▼

State: MN

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2008

**Transaction ID : SB23.6625**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Heller for Congress**

Mailing Address 7840 Red Leaf Dr.

City

Las Vegas

State

NV

Zip Code

89131

Purpose of Disbursement  
Contribution

011

Candidate Name

**DEAN HELLER**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2008



Primary



General



Other (specify) ▼

State: NV

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.7020**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. JOHN SHADEGGS FRIENDS**

Mailing Address PO BOX 45444

City

PHOENIX

State

AZ

Zip Code

85064

Purpose of Disbursement  
Contribution

011

Candidate Name

**JOHN B. SHADEGG**Category/  
Type

Office Sought:



House



Senate



President

Disbursement For: 2008



Primary



General



Other (specify) ▼

State: AZ

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.6649**

Amount of Each Disbursement this Period

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City	State	Zip Code
BAKERSFIELD	CA	93389

Purpose of Disbursement  
Contribution

Candidate Name

**KEVIN MCCARTHY**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.6663**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. KLINE FOR CONGRESS**

Mailing Address 101 W BURNSVILLE PKWY SUITE 104

City	State	Zip Code
BURNSVILLE	MN	55337

Purpose of Disbursement  
Contribution

Candidate Name

**JOHN PAUL JR KLINE**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2008

**Transaction ID : SB23.6631**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Marilyn Musgrave for U.S. Congress**

Mailing Address P. O. Box 1176

City	State	Zip Code
Greeley	CO	80632

Purpose of Disbursement  
Contribution

Candidate Name

**MARILYN MUSGRAVE**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.7025**

Amount of Each Disbursement this Period

5000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MARSHA BLACKBURN FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2008

Mailing Address PO BOX 3750

City	State	Zip Code
BRENTWOOD	TN	37024

**Transaction ID : SB23.6652**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**MARSHA MRS. BLACKBURN**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TN District: 07

Full Name (Last, First, Middle Initial)

**B. McConnell Senate Committee '08**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2008

Mailing Address P. O. box 1496

City	State	Zip Code
Louisville	KY	40201

**Transaction ID : SB23.7015**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**MITCH MCCONNELL**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 00

Full Name (Last, First, Middle Initial)

**C. MCHENRY FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2008

Mailing Address PO BOX 1406

City	State	Zip Code
HICKORY	NC	28603

**Transaction ID : SB23.6638**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**PATRICK TIMOTHY MCHENRY**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 10

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Porter for Congress**

Mailing Address 900 Pavillion Center Dr., Ste. 300

City	State	Zip Code
Las Vegas	NV	89144

Purpose of Disbursement  
Contribution

011

Candidate Name

**JON C SR PORTER**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.7006**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**RELY ON YOUR BELIEFS FUND**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2008

**Transaction ID : SB23.6622**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. ROGERS FOR CONGRESS**

Mailing Address PO BOX 581

City	State	Zip Code
BRIGHTON	MI	48116

Purpose of Disbursement  
Contribution

011

Candidate Name

**MICHAEL J ROGERS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.6644**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RYAN FOR CONGRESS**Mailing Address P. O. Box 1919  
P. O. Box 1919

City Janesville State WI Zip Code 53547

Purpose of Disbursement  
Contribution

011

Candidate Name

**PAUL D. RYAN**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2008

**Transaction ID : SB23.6618**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**B. RYAN FOR CONGRESS**Mailing Address P. O. Box 1919  
P. O. Box 1919

City Janesville State WI Zip Code 53547

Purpose of Disbursement  
Contribution

011

Candidate Name

**PAUL D. RYAN**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2008

**Transaction ID : SB23.6635**

Amount of Each Disbursement this Period

1250.00
---------

Full Name (Last, First, Middle Initial)

**C. SPRATT FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 830

City YORK State SC Zip Code 29745

Purpose of Disbursement  
Contribution

011

Candidate Name

**JOHN MCKEE JR HON SPRATT**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2008

**Transaction ID : SB23.6620**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SUE MYRICK FOR CONGRESS**

Mailing Address P.O. BOX 37091

City	State	Zip Code
CHARLOTTE	NC	28237

Purpose of Disbursement  
Contribution

Candidate Name

**SUE MYRICK**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NC District: 09

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.6655**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. UPTON FOR ALL OF US**

Mailing Address P.O. BOX 490

City	State	Zip Code
ST. JOSEPH	MI	49085

Purpose of Disbursement  
Contribution

Candidate Name

**Frederick Upton**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		21		2008

**Transaction ID : SB23.6626**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. WHITFIELD FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 391

City	State	Zip Code
HOPKINSVILLE	KY	42241

Purpose of Disbursement  
Contribution

Candidate Name

**EDWARD WHITFIELD**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: KY District: 01

Disbursement For: 2008

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2008

**Transaction ID : SB23.6659**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00
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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

### A. WICKER FOR SENATE

011

5000.00

ROGER F WICKER

Disbursement For: 2008

☐ Primary ☒ General

☐ Other (specify) ▼

Category/  
Type

**B.**

Candidate Name

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/  
Type

**C.**

### Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Category/  
Type

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

5000.00

**TOTAL** This Period (last page this line number only).....

71250.00